

**IN THE SUPERIOR COURT OF COBB COUNTY
STATE OF GEORGIA**

In re the Name Change of:

Child(ren): _____

Civil Action File No: _____

Petitioner: _____
and
Respondent: _____

PETITION TO CHANGE NAME(S) OF MINOR CHILD(REN)

Petitioner files this Petition and shows the following:

1. The following is information about the PETITIONER:

Petitioner's name: _____

Petitioner is a resident of Fulton County, Georgia.

2. The following is information about the CHILD(REN):

The name(s) of the minor child(ren):

This (or these) minor child(ren) are residents of Fulton County Georgia.

3. The relationship between the Petitioner and the minor child(ren):

Petitioner is the (check one) ☐ mother ☐ father ☐ legal guardian of the minor children. A copy of the Order of Guardianship is attached as "Exhibit A".

4. What do you want to change the names of the minor children to?

Petitioner desires to change the name of the following minor children to the following:

Current name(s) of minor child(ren)		New name(s) of minor child(ren)
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____

5. The reasons for such change of name(s) are as follows:

(Explain why you want to change the name(s) of the child(ren))

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6. **Information about the natural parents of said minor children.**

Name of natural mother: _____

Address of natural mother: _____

Name of natural father: _____

Address of natural father: _____

7. **Written consent of natural parents:**

____ The written consent of said parents to such name change is attached hereto as "Exhibit B".

OR

____ The father/mother of the children has abandoned them as he/she has not contributed to their support for a continuous period of more than 5 years before this petition was filed.

8. WHEREFORE, Petitioner prays that the name(s) of the said minor child(ren) be changed as requested in this petition, and for the following (check all that applies):

☐ Appointment of guardian ad litem

☐ Personal service on ☐ mother ☐ father ☐ guardian(s)

☐ Service by certified mail on ☐ mother ☐ father ☐ guardian(s)

This the _____ day of _____, _____.
[date] [month] [year]

Sign your name here

Petitioner's name (print or type): _____

Petitioner's address: _____

Petitioner's telephone number: (____) _____

COMMENT: If the petition seeks to change the name of a minor, the written consent of living parents or guardian is required to be filed with the petition if the parents have neither abandoned the minor nor failed to support the children for a continuous period of five years or more immediately preceding the filing of the petition. If the location or address of the parent is unknown, service of the petition on the parent shall be made by publication as provided in O.C.G.A. §19-12-1. Seek the advice of an attorney if this situation occurs.

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